Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)						nn 2)	SMALL ENTITY TYPE			OR	OTHER THAN	
TOTAL CLAIMS			う つ		(0000)			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		┢	SIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			ろ minus 20=		* O			X\$ 9=	0	OR	X\$18=	
	EPENDENT CL		3 minus 3 =		* 0			X42=	0	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT						4	⊦140=	Ø	OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	T	OTAL	375	OR	TOTAL	
CLAIMS AS AMENDED - PART II						SMALL ENTITY OR .				OTHER		
	- Lider Legisland W. Court 1 5 King Street	(Column 1) CLAIMS	Name (Section 1997)	(Colur			SMA			OH.	SMALL	
ENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	T CL AINA	=		X42=		OR	X84=	
	PIRST PRESE	NTATION OF M	OLTIPLE DEF	ENDEN	CLAIN		4	⊦140=		OR	+280=	
							•	TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	AD	DIT. FEE			ADDII. FEE	
	madartida	(Column 1) CLAIMS		HiGh		(Coldinii 3)			ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	- 01 4114	=		X42=		OR	X84=	
L	FIRST PRESE	ULTIPLE DEF	ENDEN	CLAIM			+140=		OR	+280=		
							L	TOTAL			TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	AD	DIT. FEE I		2	ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL ALIA	=		X42=		OR	X84=	
Ľ	FIRST PRESE	ENTATION OF N	IULI IPLE DEI	TIPLE DEPENDENT CLAIM			'	+140=		OR	+280=	
*	If the entry in colu	ımn 1 is less than	the entry in colu	ımn 2, wri	te "0" in co	lumn 3.	<u> </u>	TOTAL		OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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	٦,						Apr	roved for use th	rough (0/31/2002. U	VSB/06 (08-00 MID 0651-003
Under the Paperwork Reduction Act of 1995, no reasons are required to respond to a collection of information unless it the											cuttof primper
	-	PATĖNT A	APPLICATI	ON FEE D	Application or Docket Number						
	PATENT APPLICATION FEE DETERMINATION RECORD 60/413 045										
3	5 5		CLAI	SMAL	L ENTITY	OR	OTHER T				
ļ	P OR			(Column I) BER FILED	NUMBE	IR EXTRA	RAT	FEE	1	RATE	FER
12	DASIC FEE							276	1	Maria 12	
L	(37	(3) CFR 1.16(3)) EMP AND						3700	┫ :		5
L	O7 CFR Line)				us 20 - V		× 5	-	OK	x \$	
L	OF CITY (14(b)) MULTIPLE DEPENDENT CLAIM PRESENT (57 (98 1.14d))						<u>* </u>	-	OR	¥	
L	MU	LTUPLK DRPEN	DENI CLAIM	RESENT D	<u> </u>	07.0	OR	+=			
* If the difference in column 1 is less than zero, onter "0" in cultum 2											
			CLA (Column 1)	IMS AS AM	SMAL	L ENTITY	OR	OTHER T			
	AMENDMENT A		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PRRVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FRE	OR	RATE	ADDI- TIONAL FEE
		Total	*	Minus	**	=				× \$	
	ME	(3) CFR 1,14(b))	•	Minus	***	9m	х		OR	x=	,
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CPX L16(d))							•	OR	+	
		(Column 1) (Column 2) (Column 3)				TOTA ADDIT, FR		OR TOTAL ADDIT. FEE			
	DMENT B		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	AIDI- TIONAL FEB		RATE	ADDI- TIONAL PEE
	Š	Total (37 CPR 1.16(4))	•	Mims	**	-	x \$	•	OR	× \$	
	AME	Independent (37 CPK 1.16(F))	4	Mimus	***	8	x	•	OR	x *	
'	۷	FIRE! PRES]	.	OR	+=					
			(Column 1)		(Column 2)	(Column 3)	TOTA ADDIT. FE	E	OR	TOTAL DDIT. FEE	
	ENDMENT C		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL PEB
		Total (37 CFR 1-16(s))	•	Minus .	**	-	× S	#	OR OR	x \$	
1 3	Ō	Independent		Minus	***			_1	~~		

PIRET PRESENTATION OF MULTIPLE DEPENDENT CLAIM

"If the entry in column 1 is less than the ontry in column 2, writs "0" in column 3,

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, onter "20".

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, onter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, onter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to late 0.2 being to complete this form will vary depending upon the needs of the individual case.

Any comments on the amount of time you are required so complete this form should be sent to the Chief Information Officer, U.S. Patent and Trudemark Office, Washington, DC 20231. DU NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Communicators for Patents, Washington, DC 20231.

(37 CPR 1.16(d))

OR

TOTAL

ADDIT. FEE